



BOARD OF BARBERING AND COSMETOLOGY

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Ownership Disclosure Statement

Submit this form with your Online Establishment Application.

Complete ONLY the section that applies to the type of ownership established for your business.

- **Individual License/Sole Owner:** One person will control all ownership liabilities, requirements, and responsibilities of the establishment. If this category applies to you, provide your name and social security number in the appropriate sections.
- **Married/Sole Proprietorship:** A married couple who will share all ownership liabilities, requirements, and responsibilities of the establishment. If this category applies to you, each person is to provide their name and social security number in the appropriate sections.
- **Partnership:** A number of individuals will share all ownership liabilities, requirements, and responsibilities of the establishment. If this category applies, each person is to provide his/her name in the appropriate sections, along with the partnership's **Employer Identification Number (E.I.N.)**. If you are operating your business as a PARTNERSHIP and do not have a E.I.N., you **MUST** contact the Internal Revenue service (IRS) to obtain one. Your application will not be processed without a E.I.N.
- **Corporation/LLC:** A corporation registered with the State of California, Secretary of State, will be responsible for all liabilities and requirements of the establishment. The name of the corporation, along with all officer's names and titles, as well as the **E.I.N** for the corporation. Corporations must be registered with the California Secretary of State and be issued a E.I.N. from the IRS for the corporation.

If Owner is a single Individual/SOLE OWNER, complete the following: All owners listed must attach an Affidavit.

Social Security Number			<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name			First Name						Middle Name				

(OR) If Owners are Married/ SOLE PROPRIETORSHIP: Must be married couple filing joint income taxes. All owners listed must attach an Affidavit.

Social Security Number			<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name			First Name						Middle Name				
Social Security Number			<input type="text"/>	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name			First Name						Middle Name				

(OR) If Owner is a PARTNERSHIP: List ALL partners' names. Attach a separate sheet if needed. All partners listed must attach an Affidavit.

Employer Identification Number (EIN)			<input type="text"/>	<input type="text"/>	-	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name			First Name						Middle Name			

(OR) If owner is a CORPORATION/LLC: All owners or members must complete an Affidavit.

Name of Corporation/LLC			
Employer Identification Number (EIN)			
<input type="text"/>	<input type="text"/>	-	<input type="text"/>
Title/Member	Last Name	First Name	Middle Name